



PUBLIC SUPPORT FROM M&Z MAHINDRA RECEIVED IN A TIME OF URGENT NEED

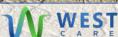


ADDITIONAL:

ERGONOMICS IN THE WORKPLACE: PREVENTING BACK PAIN WHEN SITTING • JUNE IS
MYASTHENIA GRAVES MONTH • HEALTH SERIES - CHILDHOOD ILLNESSES: IMPETIGO • HEALTH &
SAFETY: GETTING A BETTER HANDLE ON HAND SAFETY • FUN TIME - JOKE OF THE WEEK

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Public support from M&Z Mahindra received in a time of urgent need

The E.M.A. nonprofit organisation received a Support from the M&Z group. Currently our regular ambulance is at the workshop and needs a repair in the value of NAD 50,000.00.

On Friday E.M.A. reached out to the M&Z group to assist and they immediately reacted. For the time while the other ambulance is at the workshop Mahindra Windhoek supports our service with an Mahindra 4x4 Ambulance. M&Z makes with that even possible, that we can reach areas, which we couldn't reach before, thanks to the 4x4 availability of the Mahindra.



The Mahindra 4x4 Ambulance offers good interior space and availability for patient treatment.

E.M.A. is a nonprofit organisation dedicated promoting Health Care development in the Windhoek community. Its mission is to raise awareness about health issues, provide Emergency Medical Care, and initiate projects that contribute to a healthier living environment. However, to achieve these objectives, support is essential.

Donations are vital for the E.M.A. nonprofit organisation. They provide the necessary financial resources to operate, implement programs, and fulfill the organisation's mission. Without donations and community support like from the M&Z group with the Mahindra 4x4 Ambulance, E.M.A. would struggle to make a meaningful impact and reach their goals., donations help build trust and credibility, attracting more supporters and volunteers to the cause.

The donation from M&Z Mahindra, is a significant contribution to E.M.A.'s efforts. Firstly, the support allows the organisation to equip the emergency care programs to the public. It enables E.M.A. to assist the public for various of emergencies.

In addition to community engagement, the donation from M&Z Mahindra strengthens E.M.A.'s organisational capacity.



Fabian Martens, 1st Chairman of E.M.A. said: "With every donation received, E.M.A. can enhance its efficiency and effectiveness in achieving its mission. Donations play a crucial role in supporting and financing our nonprofit organisations. It enables us to make a positive impact on society. M&Z Mahindra's contribution serves the public and is highly appreciated."

As a community service and non-profit organisation, E.M.A. is "There when you need us".

i.A. Every day the organisation assists many ed, patients in need of a Rescue Service, free and of charge for those who don't have on. medical aid. E.M.A. provides high in standard care for all their patients.

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Ergonomics in the workplace: Preventing back pain when sitting

After a long day at the desk, many people are plagued by it: back pain. A well-equipped office can prevent it. How can ergonomics be implemented in the workplace? Tips for desks, chairs, computers and advice from a back expert.



Whether in the office or at home, many people spend their working day sitting down - and this has health consequences: tension in the neck and shoulders as well as back pain. Ergonomics in the workplace can prevent this - but how exactly is this implemented? What is important when designing the office to prevent back problems?

Can you really get back pain from sitting too much?

Yes, if you sit for too long, you can develop back problems. Tension in the

neck and shoulders as well as upper back pain are typical. The lower back can also be under a lot of strain. "Sitting in one position for too long causes the joints of the spine to freeze and block," explains Prof. Dr. Bernd Kladny, head physician of the Department of Orthopedics and Trauma Surgery in Herzogenaurach. Poor posture can also be the cause of back pain. The expert clarifies: "The problem is not the posture itself, but staying in the same position for too long and not moving enough."

What is the best strategy for back problems?

The best strategy for relieving back pain is exercise. "The amount of exercise a person needs varies from person to person. Some people need more, others less," says orthopedic surgeon Kladny. But what is generally true is that "any exercise is good," says the expert. An active daily routine can effectively prevent back pain. It is therefore important to implement this at work and to get up regularly. "It's great to get up and move around when you're on the phone," says Kladny.

Even simple exercises at the desk can loosen up and get the body moving. Orthopedic surgeon Kladny advises: "Take different positions. Circle your shoulders, move your arms and hunch your back." Back pain is often also related to stress. Relaxation methods can therefore be helpful.





How can you prevent back pain when sitting?

Sitting is not possible for all activities. In these cases, two things can be helpful for relieving and preventing back pain:

Ensure active balance in your free time and do sports that strengthen your back. Apps and online programs can also help with back pain. Ergonomics in the workplace and an optimally equipped work environment.

What is meant by an ergonomic workplace?

The Corona pandemic showed how important an ergonomic workplace is. At that time, the number of sick days due to back pain increased - and surveys criticized a lack of or inadequate work equipment and undemarcated work areas.

An ergonomic workplace is designed to meet the individual needs of the user. The aim is to minimize the strain on the body, for example due to poor posture. This means that the desk, chair and other work utensils are adapted to support a natural and healthy posture. Legally, there are various bases for regulating ergonomics in the workplace, such as the Workplace Ordinance, the Occupational Safety and Health Act and the Screen Work Ordinance.

Checklist: Ergonomics in the workplace

Various aspects are important for a workplace to be ergonomic and for sitting in a back-friendly manner. These are the most important measures:

Chair: The chair should have an adjustable seat height, backrest and armrest. The back should be well supported. The feet are flat on the floor. If you are sitting on a normal chair, you can help yourself by pushing a cushion into the lower back. "I advise against using sitting balls as a chair replacement," says the orthopedist. "They do not meet the legal requirements for a seated device and are associated with a risk of falling."



<u>Desk:</u> A desk that can be adjusted in height is ideal in order to optimally adjust the screen position. But you can also switch between a desk and a standing desk. "It's good if you keep changing your body position," advises Kladny.



Keyboard and mouse: The devices should be positioned so that the arms can be held at a 90-degree angle and the wrists remain straight.

<u>Screen:</u> The screen should be at eye level to avoid neck strain. It is best to position

it so that it is glare-free. Ideally, it should be about an arm's length away from the user's eyes.

<u>Lighting:</u> It is ideal if the workplace has plenty of daylight. The room lighting should provide homogeneous and largearea light. In addition, individual desk lamps should be used to create targeted lighting for specific tasks, such as reading documents or working on the computer.

Inspection and planning for an ergonomic work place is done by our platinum supporter OSH-Med international. Contact their HSE department for more information.

Telephone: 061 302 931 Email: hse@osh-med.pro Website: www.osh-med.pro



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June is Myasthenia Gravis

Month

Myasthenia Gravis (MG) is a chronic autoimmune neuromuscular disorder characterized by weakness and rapid fatigue of voluntary muscles. It occurs when the immune system mistakenly attacks the connections between nerves and muscles, specifically targeting the acetylcholine receptors at the neuromuscular junction. This impairs the transmission of nerve impulses to muscles, leading to muscle weakness.

Common Symptoms:

- Drooping of one or both eyelids (ptosis)
 - Blurred or double vision (diplopia)
 - Difficulty swallowing
 - Shortness of breath
- Weakness in the arms, hands, fingers, legs, and neck

The severity of the condition can vary widely among individuals. Treatment typically involves medications to improve neuromuscular transmission and suppress the immune response, as well as therapies like plasmapheresis or intravenous immunoglobulin (IVIG) for more severe cases. In some instances, surgical removal of the thymus gland (thymectomy) may be recommended.

Spreading awareness about MG is important for several reasons:

- 1. Early Diagnosis and Treatment
 - 2. Support and Understanding
 - 3. Research and Funding
 - 4. Reducing Stigma
 - 5. Patient Advocacy

The MG Myasthenia Gravis Foundation Namibia was registered in October last year specifically to bring about awareness, and to assist patients as best we can in the long run. Please reach out to us should you have the disease or know of someone who does. Volunteers are also welcome as we would soon like to turn all the awareness into action. If interested or you would like to know more please contact Corachia Ockhuizen 081 747 6470.





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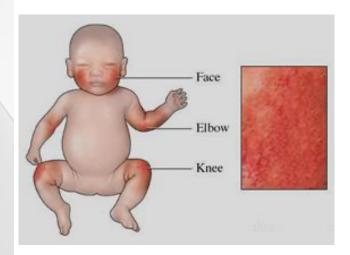
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Health Series - Childhood illnesses: Impetigo: skin infection often affects children

Doctors call it impetigo contagiosa, colloquially the disease is also known as impetigo, crusty lichen or scab blisters. How it occurs and how doctors treat it.

The warm summer is the favorite season for many bacteria. The spread of impetigo contagiosa, better known as impetigo or impetigo spp., also reaches its peak in the hot months of the year due to the favorable living conditions for the germs responsible. This extremely contagious disease is a bacterial infection. Small blisters containing fluid or pus (pustules) form on the affected areas of skin and then crust over.



Impetigo spp. can occur in all age groups, but mainly affects children. "The younger the children, the more often it occurs," says Dr. Josef Kriesmair, a specialist in pediatrics and adolescent medicine in Munich.

Symptoms of impetigo spp.

The lichen can occur all over the body, but mainly the face - especially the area around the mouth and nose - as well as the arms and legs are affected. And eczema - quite often. First, the skin becomes red and small pustules filled with fluid or pus form. These can itch unpleasantly right from the start. The danger, especially for small children, is that if they scratch the blisters, germs are released again and the infection can spread to other parts of the body.

If the pustules break open due to scratching or burst, the reddened skin underneath begins to ooze. When the blisters dry out as the infectious disease progresses, honey-colored to brown crusts form, which can also itch unpleasantly. Depending on the form of the rash, nearby lymph nodes can also swell and a slight fever can occur.

Origin of impetigo contagiosa

"Impetigo contagiosa is usually a secondary infection," explains Kriesmair. This means that the germs are often already on the skin, but are not yet pathogenic. Impetigo bacteria can only enter the body through open wounds such as chapped corners of the mouth, eczema or scratches that lead to small tears in the skin. Children with neurodermatitis are particularly at risk.

In the case of impetigo contagiosa, doctors differentiate between the smallblister and the large-blister type. Certain



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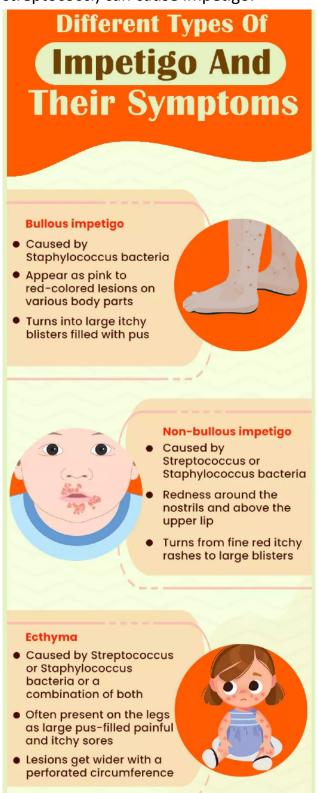




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staphylococci and streptococci (Staphylococcus aureus and group A streptococci) can cause impetigo.



Impetigo: How it is transmitted

Impetigo is a smear infection. This is why the risk of infection is particularly high in communal facilities such as kindergartens, nurseries, schools or sports clubs. Children who suffer from the rash must stay away from these facilities for the duration of the illness.

General hygiene measures are also important. This includes avoiding scratching as much as possible. Tip: Cut the children's fingernails very short and file them round during this time to minimize the risk of scratching. Children should also wash their hands frequently. Children's clothes, bed linen and towels should be washed at the highest possible temperature (over 60 degrees Celsius) after wearing or using them. Since indirect transmission is also possible, care should be taken not to drink from the same glass or share cutlery, for example.

Usually harmless

If a family member has impetigo, you should be extra cautious: pay particular attention to whether siblings have insect bites or open entry points on their skin. But there is no reason to panic. Impetigo is a harmless disease in itself, which usually heals without treatment and usually leaves no scars. If the skin surface of healthy children is completely closed i.e. there are no potential entry points and the immune system is intact - other family members do not necessarily automatically become ill.

Course of the infection

It can take between two and ten days for





TREAT WOUNDS IMMEDIATELY
 It is because broken skin is susceptible to bacterial infection and impetigo.

ADDRESS UNDERLYING SKIN ISSUES

A damaged skin barrier (caused by issues like eczema and dermatitis) allows bacteria to penetrate the skin and spread infection.

SHOWER AFTER STRENUOUS PHYSICAL ACTIVITIES

Always shower after exercising, playing a sport, or doing similar activities to clear the dirt and germ accumulation.

DO NOT SHARE PERSONAL ITEMS

Never share towels, soaps, accessories, clothes, sheets, and exercise equipment (like yoga mats).

• TRY ALTERNATIVE THERAPIES

Ingredients like tea tree oil, coconut oil, goldenseal, aloe vera, honey, and neem may help prevent infection and manage the symptoms of impetigo.

the first symptoms to appear after an infection. Impetigo contagiosa is considered infectious "until there are no more infectious germs. The wounds must be properly closed and healed for this to happen," explains pediatrician Kriesmair. If those affected strictly adhere to the hygienic measures in combination with the drug treatment, there are usually no

subsequent damages and the crusts eventually fall off the skin, which has now healed. Only in very rare cases can acute kidney inflammation occur a few weeks later.

Therapy: How is lichen planus treated?

In addition to the hygienic precautions already described, the pediatrician will decide which therapy is suitable based on the clinical diagnosis (smear) - but also the subjective complaints of the young patients. In milder cases, well-defined areas can be treated with antiseptics, disinfectants and an antibiotic ointment.

In the case of severe inflammation with fever and swollen lymph nodes, as well as in the case of repeated illnesses, Kriesmair recommends systemic treatment with antibiotics - in children in the form of juice or tablets. This is even more true the younger the children are. "Infants are particularly at risk," says Kriesmair.





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Getting a Better Handle on Hand Safety

Exploring the unique complexities of hand injuries in the workplace and actionable steps to drive prevention and improvement.

Hand injuries can be, well, a handful. As I write this column, I have received inquiries for help in preventing ongoing hand injuries within the last two days. These requests came from an "upstream" oil industry company in the United States and from the Brazilian business unit of a global manufacturer.



While more prevalent in some industries, hand injuries can affect almost everyone. And these are notoriously difficult to get a handle on for good reasons. We've found that it's relatively easy to make sizable and lasting improvements in soft-tissue injuries (strains and sprains), followed by not-quite-as-eye-popping reductions in slips/trips and falls.

However, hand injuries are the most challenging to reduce. Why? It's a matter of number of exposures. In our experience, many people lift/push/pull/ carry/use tools on the order of tens or sometimes hundreds of times a day (softtissue injury exposures.) Many take thousands of steps daily (risks of slips/trips/falls.) But people likely make tens of thousands of finger/hand/ wrist/arm motions during their day. And because the hands are most in contact with tools and equipment, these have increased first-acting and first-responder acute injury risks — not to mention the buildup of cumulative trauma.

For example, have you seen issues like these:

- Someone immediately and unconsciously reaching dangerously for something that has fallen or "gone wrong" (maybe a falling heavy or sharp object or a tool that is jammed? Reflexively reaching out a hand to "protect" the rest of their body from impact, a cutting edge, or other hazard after even a slight stumble?
- Cumulative, even-somewhatmisaligned motions that build into discomfort, pain and weakness, and that in turn can cascade into a seemingly "acute" incident?
- Loss of attention of being misdirected or distracted, daydreaming, or focused on an area of discomfort?
- Someone overusing their dominant hand so that their off-hand can be almost "out of sight, out of mind" and











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- therefore overly vulnerable?
- Overuse of the dominant hand to the point that force overconcentrates in one limb — and then in one side of the body?
- Bracing when fatigued but in a "wrong" (and thus a high-risk) place or position?

Yet, after doing what they can to shield their workers from hand injury exposures — a critical first step — many companies that still see concerning injuries then seem to "throw up their hands," being at a loss of what to do. Admonishing workers can result.

For example, when working with an oil industry client in Maracaibo, Venezuela, I noticed a poster made of an actual worker's right hand, with four fingertips separated by space from the remainder of his other joints, amputated during an industrial accident. I asked numerous workers what they thought of this poster and whether it helped remind or inspire them to work differently. Almost all vehemently said "no." Many averted their attention to the picture; others expressed dismay or anger that the company would use this worker's terrible accident to make a point. However, few acknowledged its value for preventing injuries.

What should companies do instead?

 Chart the different kinds of hand injuries in your organization. Don't lump together all hand, finger, wrist,

- hand, or upper limb injuries. What are the trends? Are you seeing bruises, pinches, lacerations, abrasions, and strains? And what are the results, amputation, dislocation, carpal tunnel syndrome, Raynaud's Disease, etc.? Seeing the actual problems can lead to more targeted solutions.
- 2. Widen the scope of the breadth of problems. Go beyond solely focusing on the hands. Discern how the entire body affects what happens to the hands. For example, if a person's base (e.g., lower body position) doesn't adequately support the work of the hands, are they overreaching? Do they experience a loss of potential grasping strength? Is there dexterity minimized? Are the upper limbs having to work overly hard, with less control, and thusly at greater risk?

Seeing hand injury problems from a broader perspective can lead to identifying and designing out previously hidden risks and also toward applying more effective human factors prevention methods.

3. Consider possible psychosocial contributors to hand injuries. There's recently been a raft of published research on such mental, social and cultural influences that either contribute or lead to soft-tissue injuries. Reflect on whether Safety leadership/culture/policies/procedures etc., might have any impacts on the incidence of these.

4. Gloves provided that either don't fit snugly or aren't appropriate for the range of tasks? Overly challenging LOTO procedures that workers wind up going around? Insufficient machine maintenance? Mixed messages where Safety and production are at odds?



5. Understand the mental component and gauge how strongly lack of attention affects hand injuries. The very volume of finger and hand movements can potentially lull any of

us into complacency. An overly narrow attention focus on hand work can go against seeing — and then simply modifying other contributing factors to lessen risk. Design and procedure in ways that encourage workers' freshly shifting attention in a safe manner. Transfer practical attention control training methods that almost anyone can learn and quickly apply.

6. Take a skills-based approach that transfers practical mental and physical skillsets that workers can arm themselves with to overcome some of their challenging exposures to hand injuries.

There is no question that hand injuries can be among the more difficult Safety problems to reduce. However, the right "different" approaches have been shown in many companies to lead to different, better results on many levels.



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